

Form CPF M 102: Campaign Finance Reports EDFORD Municipal Form Municipal Finance Reports EDFORD Municipal Finance Reports EDFORD 1 12

Municipal --Office of Campaign and Political Find ARD OF ELECTION

COMMISSION COMMISSIONER

requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

ile with: ity or Town Clerk or Election Commission	1/3/20		
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Reporting Period - Beginning: 10/26/2013	Ending: 1/3/2014		
Type of report: Dissolution			
Janice Baptist	Committee to Elect Jan Baptist		
Full Name of Candidate	Committee Name		
Councilor Ward 5	Sharon Stiffler		
Office Sought/ District	Name of Committee Treasurer		
32 James St	32 James St		
New Bedford , Ma 02740	New Bedford, Ma 02740		
Residential Address	Committee Address		
SUMMARY BALANCE	INFORMATION		
Ending Balance from previous repor-	-		
Total receipts this period:	\$490.00		
Subtotal:	\$2,527.79		
Total expenditures this period:	\$2,496.14		
Ending Balance:	\$31.65		
Total inkind contributions this pe			
Total outstanding liabilities:	·		
	\$0.00 ak Five		
	TT 7 4 4		
Affidavit of Committee Treasurer:			
I certify that I have examined this report, including attached sch belief, a true and complete statement of all campaign finance acti expenditures, disbursements, inkind contributions and liabilities finance activity of all persons acting under the authority or on b requirements of M.G.L. c. 55.	vity including all contributions, loans, receipts, for this reporting period and represents the compaign		
Signed under the penalties of perjury:			
	/ ,		
\mathcal{M}_{-}	1/3/14		
Treasurer's signature (in ink)	//3//19 Date		
Affidavit of Condidate /-bb-1 bearing	347		
Affidavit of Candidate (check 1 box only) : Candidate with Committee and no activity independent o			
I certify that I have examined this report, and attached schedules true and complete statement of all campaign finance activity, of a this committee in accordance with the requirements of M.G.L. c. 55 any liabilities nor made any expenditures on my behalf during this	and it is, to the best of my knowledge and belief, a ll persons acting under the authority or on behalf of		
Candidate without Committee OR candidate with independ I certify that I have examined this report and attached schedules a true and complete statement of all campaign finance activity inc disbursements, inkind contributions and liabilities for this report finance activity of all persons acting under the authority or on by requirements of M. 6.1. c. 55	and it is, to the best of my knowledge and belief, luding contributions, loans, receipts, expenditures, ting period and represents the compaign		

Schedule A: Receipts

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only who contribute \$200 or more in a calendar year.

Date	Name and Residential Address	Amount	Occupation and Employer
11/5/2013	Hawkins, Judith 310 Point Rd Marion, MA 02738	\$100.00	
10/30/2013	Kale Soup Cook Off, Door Sales New Bedford, MA 02740	\$280.00	
Total Itemi Total United Total Recei	zed Receipts mized Receipts pts	\$380.00 \$110.00 \$490.00	

Schedule B: Expenditures

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures over \$50 and under may be added together from committee records, and reported on line 13.

Date	Name and Address	Amount	Purpose
11/12/2013	Cobblestone Restaurant 7 S 6th St New Bedford, MA	\$475.00	Election Get Together
10/31/2013	Just in Advertising 204 Union St New Bedford, MA 02740	\$282.00	Campaign Signs
10/31/2013	NUSE	\$50.00	News Letter Design
	New Bedford, MA 02740		
10/31/2013	US Postal Service	\$685.00	Mailing
	New Bedford, MA 02740		
12/1/2013	Vista Print	\$704.14	Postcards
	New Bedford, MA 02740		
10/31/2013	WBSM 22 Sconticut Neck Rd Fairhaven, MA 02719	\$300.00	Radio Advertising
Total Item Total Unit Total Expe	emized Expenditures	\$2,496.14 \$0.00 \$2,496.14	

Schedule C: "Inkind" Contributions

Please itemize contributors who have made inkind contributions of more than \$50. In-kind contributions \$50 and under may be added together, from the committee's records, and included in line 16. An exception to this is that all contributions (under or over \$50) given by persons who have contributed more than \$50 in the calendar year must be itemized. Please report the names and addresses of contributors. Also give the occupation and employer of any contributor who has given an aggregate amount of \$200 or more in the calendar year.

Date	Name and Residential Address	Value	Description Occupation/Employer
Total Unit	ized Inkind Contributions emized Inkind Contributions nd Contributions	\$0.00 \$0.00 \$0.00	

Schedule D: Liabilities

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as the liabilities incurred during this reporting period.

Date To Whom Due

Amount

Purpose

Total Outstanding Liabilities

\$0.00